

HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND
MONTHLY COBRA PREMIUMS
ACTIVE EMPLOYEES
ALL BU'S EXCEPT BU12
EFFECTIVE JULY 1, 2009

Benefit Plan	Type of Enrollment	Total COBRA Premium
<i>MEDICAL PLANS</i>		
EUTF PPO (HMA)	Self	\$280.52
	Two-Party	\$681.44
	Family	\$869.65
EUTF PPO (HMSA)	Self	\$287.56
	Two-Party	\$698.52
	Family	\$891.46
EUTF Prescription Drug (NMHC)	Self	\$65.14
	Two-Party	\$158.16
	Family	\$201.92
EUTF HMO (HMSA) Prescription Drug	Self	\$390.54
	Two-Party	\$948.56
	Family	\$1,210.58
Kaiser Comprehensive Prescription Drug	Self	\$312.34
	Two-Party	\$758.06
	Family	\$968.16
Kaiser Basic Prescription Drug	Self	\$276.48
	Two-Party	\$670.92
	Family	\$856.98
EUTF Supplemental (HMSA) NMHC Prescription Drug	Self	\$205.59
	Two-Party	\$499.72
	Family	\$638.01
Royal State Supplemental Prescription Drug	Self	\$56.28
	Two-Party	\$139.60
	Family	\$157.43
EUTF High Deductible Health Plan (HMSA) Prescription Drug	Self	\$265.53
	Two-Party	\$645.21
	Family	\$823.57
<i>DENTAL PLAN</i>		
HDS Dental	Self	\$31.40
	Two-Party	\$62.81
	Family	\$103.37
<i>VISION PLAN</i>		
VSP Vision	Self	\$6.16
	Two-Party	\$11.40
	Family	\$14.91
<i>CHIROPRACTIC</i>		
RSN Chiropractic	Self	\$1.47
	Two-Party	\$2.94
	Family	\$3.12